

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE
09 JUL 21 AM 11:37

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Fischer for US Senate

ADDRESS (number and street)

1715 Spring Drive



Check if different
than previously
reported. (ACC)

Louisville

ky

40205

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C0044687

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

ky

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD /

YY YY YY

YY YY YY

in the
State of

YY YY YY

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD /

YY YY YY

YY YY YY

in the
State of

YY YY YY

5. Covering Period

MM / DD /

YY YY YY

YY YY YY

through

MM / DD /

YY YY YY

YY YY YY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ruth Payne

Signature of Treasurer

Ruth Payne, Treasurer

Date

MM / DD /

YY YY YY

YY YY YY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)